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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/827,642	04/06/2001	Donald P. Gravel	STE01 P-1067	9043
277	7590 09/10/2003			
PRICE HENEVELD COOPER DEWITT & LITTON 695 KENMOOR, S.E. P O BOX 2567 GRAND RAPIDS, MI 49501			EXAMINER	
			THISSELL, JENNIFER I	
GRAND RAP	1D5, WII 49501		ART UNIT	PAPER NUMBER
			3635	
			DATE MAILED: 09/10/2003	

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>&gt;</b>	Application No.	Applicant(s)			
Indonesia y Company	09/827,642	GRAVEL ET AL.			
Interview Summary	Examiner	Art Unit			
	Jennifer I Thissell	3635			
All participants (applicant, applicant's representative, PTO	personnel):				
(1) <u>Jennifer I Thissell</u> .	(3)				
(2) <u>Marcus Dolce</u> .	(4)				
Date of Interview: <u>09 September 2003</u> .					
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2)⊡ applicant's representative	e]			
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.				
Claim(s) discussed: <u>NA</u> .					
Identification of prior art discussed: Omholt et al. ('573), Varlonga ('972).					
Agreement with respect to the claims f)☐ was reached. g	g)⊠ was not reached. h)□ N	I/A.			
Substance of Interview including description of the general reached, or any other comments: The Examiner would like mistakingly incidated as being FINAL in the Office Action S of clarification, the rejection of claim 24 over Mecklenburg from the prior Office Action mailed 1/3/03.	to clarify that the Office Action Summary. The Office Action is	n mailed 6/13/03 was Non Final. Also for purposes			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached.	opy of the amendments that w	reed would render the claims yould render the claims			
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR FORM, WICHEVER IS LATER, TO FILE A STATEMENT O Summary of Record of Interview requirements on reverse s	e last Office action has already THE MAILING DATE OF THI F THE SUBSTANCE OF THE	been filed, APPLICANT IS S INTERVIEW SUMMARY			

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required